

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR

193	2606								
SEC USE ONLY									
Prefix I	Serial								
DATE	RECEIVED								
l	I								

11/27/06

UNIFORM LIMITED OFFERING EXEMPTION Name of Offering(check if this is an amendment and name has changed, and indicate change.)

Filing Under (Check box(es) that apply):	Rule_504	Rule	505		06	Section	4(6)	ULOE
Type of Filing:	🗵 New Filit	ng	Amer	ıdmei	nt				
	Α.	BASIC IDEN	TIFICA'	TION	N DATA	•			
1. Enter the information	ation requested abou	ut the issuer							
	k if this is an amend		e has ch	angec	d, and indic	ate ch	nange.)		
Nayarit Gold Inc.				J	,		0 /		
Address of Executive Office	s (Number and Street,	City, State, Zip	Code)		Telephone	Numb	er (Includi	ng Area	Code)
76 Temple Terrace	•		,		(902) 252-			Ü	•
Suite 150					` ,				
Lower Sackville, Nova S	cotia B4C 0A7								
Address of Principal Busines	s Operations (Numbe	r and Street, Cit	y, State, Z	ip	Telephone :	Numb	er (Includi	ng Area	Code)
Code) (if different from Exec	cutive Offices)	PROC	ESSF	ומ	•		,	_	ŕ
		PROC	,LJUL						ore
Brief Description of Busin	ness	ALIC 9	g 2008					06-11	Fracessing
We are an exploration st	age mining compa		8 2008					Wan	Section -
<u>-</u>			NI DELI	TED	ς				Cacadon
Type of Business Organiz	ation	THOMSC	NA KEO	161	-				6 2 2 2008
☑ corporation	limited partners				other (ple	ase s	pecify):	4L	U Z Z LUUC
business trust	limited partners				1		,		
	•							Wes	inington, DD
									71(0,0)
•			Mont	h	Yea	r			• • • • • • • • • • • • • • • • • • • •
Actual or Estimated Date	of Incorporation or	Organization	May	2	200	5	⊠Actu	al E	stimated
Jurisdiction of Incorporati					S. Postal Se		abbrevia		
		•			for other for				CN.
GENERAL INSTRUCTIO	NS			-, ,	121 23441 1				

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering. any change thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA
 Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers.
Check Box(es) that Apply: Promoter Beneficial Owner 国Executive Officer 国Director General and/or Managing Partner
Full Name (Last name first, if individual) Sutherland, Colin
Business or Residence Address (Number and Street, City, State, Zip Code) 76 Temple Terrace Suite 150 Lower Sackville, Nova Scotia B4C 0A7
Check Box(es) that Apply: Promoter Beneficial Owner ☐ Executive Officer ☑ Director General and/or Managing Partner
Full Name (Last name first, if individual) Saxton, Paul
Business or Residence Address (Number and Street, City, State, Zip Code) 76 Temple Terrace Suite 150 Lower Sackville, Nova Scotia B4C 0A7
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) Eyton, J. Trevor
Business or Residence Address (Number and Street, City, State, Zip Code) 76 Temple Terrace Suite 150 Lower Sackville, Nova Scotia B4C 0A7
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer 図 Director General and/or Managing Partner
Full Name (Last name first, if individual) Flemming, Donald
Business or Residence Address (Number and Street, City, State, Zip Code) 76 Temple Terrace Suite 150 Lower Sackville, Nova Scotia B4C 0A7

Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ☑Director General and/or Managing Partner
Full Name (Last name first, if individual) MacMullin, R. Glenn
Business or Residence Address (Number and Street, City, State, Zip Code) 76 Temple Terrace Suite 150 Lower Sackville, Nova Scotia B4C 0A7
Check Box(es) that Apply: Promoter Beneficial Owner ☑ Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) Warren, William
Business or Residence Address (Number and Street, City, State, Zip Code) 76 Temple Terrace Suite 150 Lower Sackville, Nova Scotia B4C 0A7
Check Box(es) that Apply: Promoter Beneficial Owner \(\mathbb{Z}\)Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) Spidle, Megan
Business or Residence Address (Number and Street, City, State, Zip Code) 76 Temple Terrace Suite 150 Lower Sackville, Nova Scotia B4C 0A7
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)

1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.	Yes 🖸	☑ No
2. What is the minimum investment that will be accepted from any individual?	\$0.0	
3. Does the offering permit joint ownership of a single unit?	⊠Yes	No
4. Enter the information requested for each person who has been or will be paid or given, directly commission or similar remuneration for solicitation of purchasers in connection with sales of secu offering. If a person to be listed is an associated person or agent of a broker or dealer registered wi with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed persons of such a broker or dealer, you may set forth the information for that broker or dealer only	rities in thith the SE	ne C and/or
Full Name (Last name first, if individual) BMO Capital Markets Corp. Business or Residence Address (Number and Street, City, State, Zip Code)		
3 Times Square NewYork, New York 10036		
Name of Associated Broker or Dealer		
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [AL] [AK] [\overline{\text{MAZ}}] [AR] [\overline{\text{CCA}}] [CO] [\overline{\text{CCT}}] [DE] [DC] [FL] [ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [\overline{\text{MAJ}}] [MI] [\overline{\text{MO}}] [MT] [NE] [NV] [NH] [NJ] [NM] [\overline{\text{MNJ}}] [NC] [ND] [OH]	All S [GA] (☑MN] [⊠OK]	States [HI] [MS]
Full Name (Last name first, if individual) Griffiths McBurney Corp.		
Business or Residence Address (Number and Street, City, State, Zip Code) 145 King West Suite 300 Toronto, ON m5H 1J8		
Name of Associated Broker or Dealer		_
[ID] [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [\boxtimes MA] [MI] [\boxtimes [MO] [MT] [NE] [NV] [NH] [NJ] [NM] [\boxtimes NY] [NC] [ND] [OH]	[GA] (MN) (⊠OK)	States [HI] [MS] [(OR] WY]
Full Name (Last name first, if individual)		
Business or Residence Address (Number and Street, City, State, Zip Code)		
Name of Associated Broker or Dealer		·
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States) [AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA]		States [ID]

INFORMATION ABOUT OFFERING

B.

[IL]	[IN]	[AI]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[HO]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	{WI}	[WY]	[PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

_							
1.	Enter the aggregate offering price of securities included in this offering	g and	the total				
	already sold. Enter "0" if answer is "none" or "zero." If the transaction						
	g, check this box and indicate in the columns below the amounts of the	e sec	curities offer	ed			
for exch	nange and already exchanged.						
			Aggregate		Am	nount Alrea	ď
	Type of Security	Of	fering Price			Sold	
	Debt	\$	0		\$	0	
	Equity	\$	0		\$	0	
	☐ Common ☐ Preferred						
	Convertible Securities (including warrants)	\$	0		\$	0	
	Partnership Interests	\$			\$	0	
	Other: "Unit" consisting of one common share and one common		,922,416			922,416	
	purchase warrant		,,,,,,	•	,-	,	
	Total	\$			\$		
	101111111111111111111111111111111111111	Ψ			Ψ		
	Answer also in Appendix, Column 3, if filing unde	r UL	LOE.				
2.	Enter the number of accredited and non-accredited investors who have	pur	chased secu	ritie	es		
in this c	offering and the aggregate dollar amounts of their purchases. For offering						
	the number of persons who have purchased securities and the aggregate						
	rchases on the total lines. Enter "0" if answer is "none" or "zero."			•			
v					Aσ	gregate	
		Ni	ımber			llar Amoun	t
			vestors			Purchases	٠
	Accredited Investors					2,416	
	Non-accredited Investors.			\$		2,410	
	Total (for filings under Rule 504 only)			\$			
				Φ	v		
	Answer also in Appendix, Column 4, if filing unde	U	DE.				
•	1641' CU' ' C CC' 1 D 1 504 505		. 10				
3.	If this filing is for an offering under Rule 504 or 505, enter the information of the state of t				HI		
	es sold by the issuer, to date, in offerings of the types indicated, in the ty			15			
	the first sale of securities in this offering. Classify securities by type lis	ted	ın Part C-				
Questio	n I.						
		Ту	pe of		Do	llar Amoun	t
	Type of offering	Se	curity			Sold	
	Rule 505	NA.			\$	0	
	Regulation A				\$	0	
	Rule 504				\$	0	
	Total				Š	0	
					•	•	
4. a.	Furnish a statement of all expenses in connection with the issuance and	d dis	tribution of	the			
	es in this offering. Exclude amounts relating solely to organization expe						
	formation may be given as subject to future contingencies. If the amount				ie		
	wn, furnish an estimate and check the box to the left of the estimate.	. 01 6	in expenditu	ii C	3		
HOU KILO					N	one	
	Transfer Agent's Fees	*****					
	Printing and Engraving Costs				-	one	
	Legal Fees					10,000	
	Accounting Fees					one	
	Engineering Fees				-	one	
	Sales Commissions (specify finders' fees separately)					46,121	
	Other Expenses (identify) Finder's Fee				_	one	
	Total	••••			\$15	56,121	

C	. OFFERING PRIC	E, NUMBER OF INVESTORS, EXPI	ENSES AND USE O	F PROCEEDS
	al expenses furnished in res	nce between the aggregate offering price ponse to Part C - Question 4.a. This difference.	e given in response to erence is the "adjuste	Part C - Question I d gross proceeds to
of the e	purposes shown. If the amo	nt of the adjusted gross proceeds to the is unt for any purpose is not known, furnis syments listed must equal the adjusted grabove.	h an estimate and che	ck the box to the le
·	·		Payments to	
			Officers,	
			Directors, &	Payments To
			Affiliates	Others
	Salaries and fees		\$	\$
			\$	\$
	Purchase, rental or leasing	g and installation of machinery		
	and equipment		\$	\$
		f plant buildings and facilities	S	\$
		nesses (including the value	-	
		his offering that may be used		
	in exchange for the assets			
	•	er)	\$	\$
		SS	\$	\$
			\$	□ \$ 100,000
	Other (specify)-Explorati		Š	\$2,666,305
		the State of Nayarit, Mexico	•	\$ =,,
				□ \$
		olumn totals added)	\$	\$2,666,305
	(0	· · · · · · · · · · · · · · · · · · ·	•	_ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
		D. FEDERAL SIGNATUR	E	
inder I Exchar	Rule 505, the following sign	tice to be signed by the undersigned duly nature constitutes an undertaking by the iten request of its staff, the information for agraph (b)(2) of Rule 502.	ssuer to furnish to the	U.S. Securities an
	(Print or Type) it Gold Inc.	Signature	Date	
•	n Spidle, Chief Financial	Mspidle	August 8, 2008	
Jame d	of Signer (Print or Type)	Title of Signer (Print or Type)]	

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No 🗵
	See Appendix, Column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Nayarit Gold Inc. Megan Spidle, Chief Financial Officer	MApidle	August 8, 2008
Name of Signer (Print or Type)	Title of Signer (Print or Type)	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

	2 3				5				
	non-acc	in State	Type of security and aggregate offering price offered in state (Part C Item 1)	ε	Type of investor and amount purchased in State (Part C- Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL		✓							
AK		✓							
AZ		√]	\$ 9,996				·
AR		✓							
CA		✓		4	\$116,424				
СО		√							
СТ		✓		2	\$155,064				
DE		✓							
DC		✓							
FL		✓							
GA		1							
HI	-	✓							
ID		✓							
IL		✓							
IN		✓							
IA		✓		<u>"</u>					
KS		✓				-			
KY	·	✓							
LA		✓							
ME		✓							
MD		✓							
MA		✓		1	\$154,000				
MI		✓							
MN		√		1	\$ 4,984				
MS		✓							
МО		√							

APPENDIX

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	2 3				5				
	non-acc	o sell to credited s in State - Item 1)	Type of security and aggregate offering price offered in state (Part C Item 1)		Type of investor and amount purchased in State (Part C- Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
MT		✓							
NE		✓							
NV		✓							
NH		✓							
NJ		✓							
NM		✓							
NY		√		3	\$2,473,996				
NC		√							
ND		✓							
ОН		✓							-
OK		✓		1	\$ 4,984				
OR		✓							
PA		✓							
RI		✓							
SC		✓							
SD		✓							
TN		✓	-						
TX		✓							
UT		✓							
VT		√							
VA		√							
WA		✓		1	\$ 2,968				
WV		✓							
WI		✓							
WY		√							
PR		✓						777	TH
				-		-			NID.